

Fill in this information to identify the case:

Debtor name **85 Flatbush RHO Hotel LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) **20-23281-rdd**

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 19, 2021**

X /s/ DAVID GOLDWASSER

Signature of individual signing on behalf of debtor

DAVID GOLDWASSER

Printed name

Authorized Signatory of GC Realty Advisors LLC, Manager

Position or relationship to debtor

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 United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**
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Official Form 204
Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders
12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
4 Sylvan Way LLC 5516 11th Ave Brooklyn, NY 11219						\$83,333.00
C&A Marketing Inc. 30 Van Buren Drive #201 Monroe, NY 10950						\$33,333.00
Chaim Hager 1253 47 Street Brooklyn, NY 11219						\$83,333.00
Cheskiel Berkowitz 70 Union Ave Apt. 1 Brooklyn, NY 11206						\$83,333.00
Con Edison P.O. Box 1701 New York, NY 10116						\$144,699.91
Duetto Research Inc. 2001 Gateway Place #520W San Jose, CA 95110						\$31,076.94
Dura-Lift Inc. 201 Hartle Street Suite B Sayreville, NJ 08872						\$29,259.12
Enercon Technical Service 1233 McDonald Avenue Brooklyn, NY 11230						\$14,139.11
Greater Shield P.O. Box 110836 Brooklyn, NY 11211						\$369,452.62

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Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Green & White Boutique Linen 410 Garibaldi Avenue Lodi, NJ 07644						\$16,344.78
Herman Rubin 175 Clymer Street Brooklyn, NY 11211						\$33,333.00
House of Kooser P.O. Box 3184 New York, NY 10163						\$18,142.41
Jacob Rubin 858 Bedford Avenue Brooklyn, NY 11205						\$83,333.00
NYC DEPT. OF FINANCE 345 ADAMS STREET, 3RD FL. ATTN: LEGAL AFFAIRS Brooklyn, NY 11201						\$239,724.12
NYS Sales Tax Processing P.O. Box 15168 Albany, NY 12212						\$140,807.02
Oracle America, Inc. P.O. Box 203448 Dallas, TX 75320						\$20,824.84
Rightway Restoration LLC 98 Beard St. Brooklyn, NY 11231						\$34,297.80
Simon's Industrial Supply 45-02 37th Avenue Long Island City, NY 11101						\$33,821.48
Toys For You Inc. 1172 59th Street Brooklyn, NY 11219						\$66,666.00
TravelClick Inc. P.O. Box 71199 Chicago, IL 60694						\$21,050.46

Fill in this information to identify the case:Debtor name **85 Flatbush RHO Hotel LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**Case number (if known) **20-23281-rdd**☐ Check if this is an amended filing**Official Form 206Sum**
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **1,388,390.00****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **1,388,390.00****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **70,000,000.00****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **1,731,153.91****4. Total liabilities**
Lines 2 + 3a + 3b\$ **71,731,153.91**

Fill in this information to identify the case:Debtor name **85 Flatbush RHO Hotel LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**Case number (if known) **20-23281-rdd**☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☒ No. Go to Part 2.
☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments**13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

General description**Date of the last physical inventory****Net book value of debtor's interest**
(Where available)**Valuation method used for current value****Current value of debtor's interest****19. Raw materials**

Debtor 85 Flatbush RHO Hotel LLC
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20. **Work in progress**
21. **Finished goods, including goods held for resale**
22. **Other inventory or supplies**
Keys, Pens, Stationery

Value subject to appraisal		Unknown	\$14,000.00
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Office supplies

Value subject to appraisal		Unknown	\$3,000.00
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Liquor

Value subject to appraisal		Unknown	\$15,000.00
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Flatware/Glasses

Value subject to appraisal		Unknown	\$28,000.00
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23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$60,000.00

24. **Is any of the property listed in Part 5 perishable?**

☒ No
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. **Office furniture**

Debtor 85 Flatbush RHO Hotel LLC
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186 TV + brackets

Value subject to appraisal	Unknown	\$120,900.00
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174 Beds (frame + mattress

Value subject to appraisal	Unknown	\$252,300.00
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60 Standing Lamps

Value subject to appraisal	Unknown	\$4,500.00
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12 Suite Pull Out Sofas

Value subject to appraisal	Unknown	\$24,000.00
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180 Desks

Value subject to appraisal	Unknown	\$81,000.00
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Lobby Furniture

Value subject to appraisal	Unknown	\$35,000.00
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5 Sets of Hallway Furniture

Value subject to appraisal	Unknown	\$6,750.00
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Cafe Furniture

Value subject to appraisal	Unknown	\$5,500.00
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Outdoor Furniture

Value subject to appraisal	Unknown	\$10,000.00
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Linen/Terry + pillows

Value subject to appraisal	Unknown	\$80,000.00
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Restaurant Furniture

Value subject to appraisal	Unknown	\$50,000.00
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Gym Equipment

Value subject to appraisal	Unknown	\$20,000.00
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180 Desk Lamps

Value subject to appraisal	Unknown	\$21,600.00
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303 Nightstands

Value subject to appraisal Unknown \$42,420.00

180 Minibar fridges

Value subject to appraisal Unknown \$35,820.00

Ballroom Furniture

Value subject to appraisal Unknown \$45,000.00

12 Room Rugs

Value subject to appraisal Unknown \$21,600.00

40. **Office fixtures
200 Clocks**

Value subject to appraisal Unknown \$21,800.00

41. **Office equipment, including all computer equipment and
communication systems equipment and software
200 phones**

Value subject to appraisal Unknown \$13,000.00

18 BOH Computers + Laptops + Printers

Value subject to appraisal Unknown \$25,200.00

Kitchen Equipment

Value subject to appraisal Unknown \$350,000.00

180 Coffee Machines

Value subject to appraisal \$0.00 Unknown

42. **Collectibles** *Examples: Antiques and figurines; paintings, prints, or other artwork;
books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card
collections; other collections, memorabilia, or collectibles*
42.1. **400 pieces of Artwork**

Value subject to appraisal Unknown \$62,000.00

43. **Total of Part 7.**
Add lines 39 through 42. Copy the total to line 86.

\$1,328,390.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

Official Form 206A/B Schedule A/B Assets - Real and Personal Property

page 4

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- ☐ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☐ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

Nature and extent of debtor's interest in property

Net book value of debtor's interest (Where available)

Valuation method used for current value

Current value of debtor's interest

55.1. Real property and improvements located at 85 Flatbush Avenue Extension, Brooklyn, New York (Block 120, Lots 1201 and 1202)

Value subject to appraisal

Unknown

Unknown

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☐ Yes Fill in the information below.

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Part 11: **All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$60,000.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$1,328,390.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$1,388,390.00</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$1,388,390.00</u>

Fill in this information to identify the case:Debtor name **85 Flatbush RHO Hotel LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**Case number (if known) **20-23281-rdd**☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1	85 Flatbush Avenue 1 LLC <small>Creditor's Name</small> 520 Madison Avenue Suite 3501 New York, NY 10022 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Real property and improvements located at 85 Flatbush Avenue Extension, Brooklyn, New York (Block 120, Lots 1201 and 1202) Value subject to appraisal Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$70,000,000.00 Unknown

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$70,000,000.00**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
Kriss & Feuerstein 360 Lexington Avenue Suite 1200 New York, NY 10017	Line 2.1	

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Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☒ No. Go to Part 2.☐ Yes. Go to line 2.**Part 2: List All Creditors with NONPRIORITY Unsecured Claims****3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address 4 Sylvan Way LLC 5516 11th Ave Brooklyn, NY 11219 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$83,333.00
3.2	Nonpriority creditor's name and mailing address AC Elite Steel Inc. 124 Scholes Street Brooklyn, NY 11206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$435.50
3.3	Nonpriority creditor's name and mailing address ADP, LLC P.O BOX 842875 Boston, MA 02284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$3,219.67
3.4	Nonpriority creditor's name and mailing address Aflac Worldwide Headquart 1932 Wynnton Rd. Columbus, GA 31999 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,069.56

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3.5	Nonpriority creditor's name and mailing address Air Aroma USA Dist LLC 263 38th Street Level 12 New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,529.86
3.6	Nonpriority creditor's name and mailing address Anya's Licorice Inc. 261 Hudson St. #10V New York, NY 10013 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$694.69
3.7	Nonpriority creditor's name and mailing address Backstage AS 36 Conselyea St. Apt. 1A Brooklyn, NY 11211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000.00
3.8	Nonpriority creditor's name and mailing address BP Environmental Services P.O. Box 188 Chalfont, PA 18914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,000.00
3.9	Nonpriority creditor's name and mailing address C&A Marketing Inc. 30 Van Buren Drive #201 Monroe, NY 10950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,333.00
3.10	Nonpriority creditor's name and mailing address Cashier Depot Corp. PO Box 373 Marlboro, NJ 07746 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$133.89
3.11	Nonpriority creditor's name and mailing address Chaim Hager 1253 47 Street Brooklyn, NY 11219 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$83,333.00

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3.12	Nonpriority creditor's name and mailing address Champion Combustion 850 Elbe Ave Staten Island, NY 10304 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$666.86
3.13	Nonpriority creditor's name and mailing address Chatham Hedging Adviors 670 Myrtle Ave Suite 575 Brooklyn, NY 11205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$195.00
3.14	Nonpriority creditor's name and mailing address Cheskiel Berkowitz 70 Union Ave Apt. 1 Brooklyn, NY 11206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$83,333.00
3.15	Nonpriority creditor's name and mailing address Comfort Bedding 13 Christopher Ave. Brooklyn, NY 11212 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$729.46
3.16	Nonpriority creditor's name and mailing address Con Edison P.O. Box 1701 New York, NY 10116 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$144,699.91
3.17	Nonpriority creditor's name and mailing address Croker Fire Drill Corpora 235 Brooksite Drive Hauppauge, NY 11788 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$148.86
3.18	Nonpriority creditor's name and mailing address CSC P.O.BOX 13397 Philadelphia, PA 19101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,915.95

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3.19	Nonpriority creditor's name and mailing address Duetto Research Inc. 2001 Gateway Place #520W San Jose, CA 95110 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,076.94
3.20	Nonpriority creditor's name and mailing address Dura-Lift Inc. 201 Hartle Street Suite B Sayreville, NJ 08872 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,259.12
3.21	Nonpriority creditor's name and mailing address EEMD INC. 9 WACCABUC RIVER LANE South Salem, NY 10590 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,040.00
3.22	Nonpriority creditor's name and mailing address Enercon Technical Service 1233 McDonald Avenue Brooklyn, NY 11230 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,139.11
3.23	Nonpriority creditor's name and mailing address FedEx P.O. Box 371461 Pittsburgh, PA 15250 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$183.19
3.24	Nonpriority creditor's name and mailing address First Insurance Funding P.O. BOX 7000 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,811.92
3.25	Nonpriority creditor's name and mailing address George Kenedy LLC P.O. BOX 40498 Brooklyn, NY 11204 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,000.00

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3.26	Nonpriority creditor's name and mailing address Greater Shield P.O. Box 110836 Brooklyn, NY 11211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$369,452.62
3.27	Nonpriority creditor's name and mailing address Green & White Boutique Linen 410 Garibaldi Avenue Lodi, NJ 07644 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,344.78
3.28	Nonpriority creditor's name and mailing address GuestTek Interactive Entertainment Inc. 1501 North Plano Road Ste 100 Richardson, TX 75081 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,468.58
3.29	Nonpriority creditor's name and mailing address Harbor Linen P.O. Box 3510 Cherry Hill, NJ 08034 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,054.08
3.30	Nonpriority creditor's name and mailing address Hardvard Stars Inc. 38 West 32nd St. #1605 New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,024.75
3.31	Nonpriority creditor's name and mailing address Herman Rubin 175 Clymer Street Brooklyn, NY 11211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,333.00
3.32	Nonpriority creditor's name and mailing address Hotels By Day, LLC 64 Beaver Street New York, NY 10004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$146.57

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3.33	Nonpriority creditor's name and mailing address House of Kooser P.O. Box 3184 New York, NY 10163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,142.41
3.34	Nonpriority creditor's name and mailing address ID Cleaners & Carpeting 167 Madison Avenue New York, NY 10016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,355.00
3.35	Nonpriority creditor's name and mailing address INTERNAL REVENUE SERVICE PO BOX 7346 Philadelphia, PA 19101-7346 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: FOR NOTICE PURPOSES ONLY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.36	Nonpriority creditor's name and mailing address Jacob Rubin 858 Bedford Avenue Brooklyn, NY 11205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$83,333.00
3.37	Nonpriority creditor's name and mailing address John Mini Distinctive Landscapes 250 Brenner Drive Congers, NY 10920 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,995.44
3.38	Nonpriority creditor's name and mailing address M3 ACCOUNTTING + ANALYTIC 1715 N Brown Road Bldg. A, Suite 200 Lawrenceville, GA 30043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,011.15
3.39	Nonpriority creditor's name and mailing address M6iT Consulting 203 West 87th St Suite 32 New York, NY 10024 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,211.68

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3.40	Nonpriority creditor's name and mailing address Manhattan Beer Distributo 955 East 149th Street Bronx, NY 10455 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,183.80
3.41	Nonpriority creditor's name and mailing address MR Linen Services LLC 575 Lexington Ave 4th Fl. New York, NY 10022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,344.75
3.42	Nonpriority creditor's name and mailing address National Grid P.O. Box 11741 Newark, NJ 07101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,607.31
3.43	Nonpriority creditor's name and mailing address NY STATE DEPT. OF FINANCE ATTN: BANKRUPTCY SPECIAL PO BOX 5300 Albany, NY 12205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: FOR NOTICE PURPOSES ONLY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.44	Nonpriority creditor's name and mailing address NYC DEPT. OF FINANCE 345 ADAMS STREET, 3RD FL. ATTN: LEGAL AFFAIRS Brooklyn, NY 11201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$239,724.12
3.45	Nonpriority creditor's name and mailing address NYS Sales Tax Processing P.O. Box 15168 Albany, NY 12212 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140,807.02
3.46	Nonpriority creditor's name and mailing address Oracle America, Inc. P.O. Box 203448 Dallas, TX 75320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,824.84

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3.47	Nonpriority creditor's name and mailing address Personnel Concepts P.O. BOX 3353 San Dimas, CA 91773 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$88.90
3.48	Nonpriority creditor's name and mailing address Power Pro NY 100A Broadway #233 Brooklyn, NY 11249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$517.16
3.49	Nonpriority creditor's name and mailing address Premium Pest Control P.O. Box 1261 Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,135.60
3.50	Nonpriority creditor's name and mailing address Protel Voice Data Security Corp. 709 Church Avenue Brooklyn, NY 11218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$811.11
3.51	Nonpriority creditor's name and mailing address Purchase Power PO Box 371874 Pittsburgh, PA 15250-7874 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,778.34
3.52	Nonpriority creditor's name and mailing address Rightway Restoration LLC 98 Beard St. Brooklyn, NY 11231 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,297.80
3.53	Nonpriority creditor's name and mailing address Rise Elevator Inspections 2008 Ocean Ave Suite 2C Brooklyn, NY 11230 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,790.00

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3.54	Nonpriority creditor's name and mailing address SAVECOM 709 Church Ave Brooklyn, NY 11218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,646.86
3.55	Nonpriority creditor's name and mailing address Simon's Industrial Supply 45-02 37th Avenue Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,821.48
3.56	Nonpriority creditor's name and mailing address T-Y Group, LLC P.O Box 538033 Atlanta, GA 30353 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,389.32
3.57	Nonpriority creditor's name and mailing address The New York Times P.O. Box 371427 Pittsburgh, PA 15250 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$288.00
3.58	Nonpriority creditor's name and mailing address The Regency Group 32 West 39th Street 12th Floor New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,881.41
3.59	Nonpriority creditor's name and mailing address TimePayment Corp P.O. BOX 3069 Woburn, MA 01888 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$327.98
3.60	Nonpriority creditor's name and mailing address Toys For You Inc. 1172 59th Street Brooklyn, NY 11219 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$66,666.00

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3.61	Nonpriority creditor's name and mailing address Traore Cleaning LLC 1187 Anderson Ave Apt. 6E Bronx, NY 10452 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,812.95
3.62	Nonpriority creditor's name and mailing address Travel Media Group P.O. Box 775523 Chicago, IL 60677 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,625.00
3.63	Nonpriority creditor's name and mailing address TravelClick Inc. P.O. Box 71199 Chicago, IL 60694 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,050.46
3.64	Nonpriority creditor's name and mailing address Wolf Gordon 333 Seventh Ave 6th FL New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,579.15

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	CORP. COUNSEL FOR NYC 100 CHURCH STREET New York, NY 10007	Line 3.44 <input type="checkbox"/> Not listed. Explain ____	—
4.2	OFFICE OF THE ATTY GEN 28 Liberty St. New York, NY 10005	Line 3.43 <input type="checkbox"/> Not listed. Explain ____	—
4.3	US ATTY OFFICE -SDNY 86 CHAMBERS STREET ATTN: TAX AND BANKRUPTCY New York, NY 10007	Line 3.35 <input type="checkbox"/> Not listed. Explain ____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1	5a. \$	0.00
5b. Total claims from Part 2	5b. + \$	1,731,153.91

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5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

5c.

\$	1,731,153.91
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Fill in this information to identify the case:

Debtor name **85 Flatbush RHO Hotel LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) **20-23281-rdd**

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Fill in this information to identify the case:Debtor name **85 Flatbush RHO Hotel LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**Case number (if known) **20-23281-rdd**☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:***2.1 85 Flatbush RHO****Residential LLC
c/o GC REALTY ADVISORS
3284 N 29th Court
Hollywood, FL 33020****85 Flatbush Avenue 1
LLC**☒ D **2.1**
☐ E/F _____
☐ G _____**2.2 Lipa Rubin****860 Bedford Avenue
Brooklyn, NY 11205****85 Flatbush Avenue 1
LLC**☒ D **2.1**
☐ E/F _____
☐ G _____

Fill in this information to identify the case:Debtor name **85 Flatbush RHO Hotel LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**Case number (if known) **20-23281-rdd**☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****04/19**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From **1/01/2020** to **Filing Date****Sources of revenue**
Check all that apply☒ Operating a business☐ Other _____**Gross revenue**
(before deductions and exclusions)**\$2,490,300.00****For prior year:**From **1/01/2019** to **12/31/2019**☒ Operating a business☐ Other _____**\$9,968,259.00****2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**
Check all that apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
---------------------------	----------------	------------------------------------	----------------

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☐ None

Description of the property lost and how the loss occurred**Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

Dates of loss**Value of property lost****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer?
Address

If not money, describe any property transferred

Dates

Total amount or value

11.1. **Robinson Brog**
875 Third Avenue
New York, NY 10022

9/14/20
11/24/20
12/18/20

\$206,944.00

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device

Describe any property transferred

Dates transfers were made

Total amount or value

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer?
Address

Description of property transferred or payments received or debts paid in exchange

Date transfer was made

Total amount or value

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address

Dates of occupancy
From-To

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or

- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

Depository institution name and address

Names of anyone with access to it
Address

Description of the contents

Do you still have it?

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☒ None

Facility name and address

Names of anyone with access to it

Description of the contents

Do you still have it?

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

- ☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
------------------	----------------------------

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None**Name and address****If any books of account and records are unavailable, explain why**

26c.1. **Shiraz Ali**
85 Flatbush Avenue Ext.
Brooklyn, NY 11201

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
GC Realty Advisors	3284 N 29th Court Hollywood, FL 33020	Manager	
85 Flatbush Rho Mezz LLC	c/o GC REALTY ADVISORS 3284 N 29th Court Hollywood, FL 33020		
Miranda Brewer	Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808	Independent Manager	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No☐ Yes. Identify below.**Name and address of recipient****Amount of money or description and value of property****Dates****Reason for providing the value**

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 19, 2021**

/s/ DAVID GOLDWASSER

Signature of individual signing on behalf of the debtor

DAVID GOLDWASSER

Printed name

Position or relationship to debtor **Authorized Signatory of GC Realty
Advisors LLC, Manager**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

United States Bankruptcy Court
Southern District of New York

In re **85 Flatbush RHO Hotel LLC**

Debtor(s)

Case No. **20-23281-rdd**Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>206,944.00</u>
Prior to the filing of this statement I have received	\$	<u>0.00</u>
Balance Due	\$	<u>206,944.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January 19, 2021

Date

/s/ FRED B. RINGEL

FRED B. RINGEL

Signature of Attorney

**ROBINSON BROG LEINWAND GREENE GENOVESE &
GLUCK P.C.**

875 THIRD AVENUE

New York, NY 10022

(212) 603-6300

Name of law firm

**United States Bankruptcy Court
Southern District of New York**

In re 85 Flatbush RHO Hotel LLC

Debtor(s)

Case No. 20-23281-rdd
Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
85 Flatbush RHO Mezz LLC c/o GC REALTY ADVISORS 3284 N 29th Court Hollywood, FL 33020		100%	Member

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Authorized Signatory of GC Realty Advisors LLC, Manager** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date January 19, 2021

Signature /s/ DAVID GOLDWASSER
DAVID GOLDWASSER

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Southern District of New York**

In re **85 Flatbush RHO Hotel LLC**

Debtor(s)

Case No. **20-23281-rdd**

Chapter **11**

VERIFICATION OF CREDITOR MATRIX

I, the Authorized Signatory of GC Realty Advisors LLC, Manager of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **January 19, 2021**

/s/ DAVID GOLDWASSER

**DAVID GOLDWASSER/Authorized Signatory of GC Realty
Advisors LLC, Manager**

Signer/Title

4 SYLVAN WAY LLC
5516 11TH AVE
BROOKLYN, NY 11219

85 FLATBUSH AVENUE 1 LLC
520 MADISON AVENUE
SUITE 3501
NEW YORK, NY 10022

85 FLATBUSH RHO
RESIDENTIAL LLC
C/O GC REALTY ADVISORS
3284 N 29TH COURT
HOLLYWOOD, FL 33020

AC ELITE STEEL INC.
124 SCHOLES STREET
BROOKLYN, NY 11206

ADP, LLC
P.O BOX 842875
BOSTON, MA 02284

AFLAC WORLDWIDE HEADQUART
1932 WYNNTON RD.
COLUMBUS, GA 31999

AIR AROMA USA DIST LLC
263 38TH STREET
LEVEL 12
NEW YORK, NY 10018

ANYA'S LICORICE INC.
261 HUDSON ST.
#10V
NEW YORK, NY 10013

BACKSTAGE AS
36 CONSELYEA ST.
APT. 1A
BROOKLYN, NY 11211

BP ENVIRONMENTAL SERVICES
P.O. BOX 188
CHALFONT, PA 18914

C&A MARKETING INC.
30 VAN BUREN DRIVE
#201
MONROE, NY 10950

CASHIER DEPOT CORP.
PO BOX 373
MARLBORO, NJ 07746

CHAIM HAGER
1253 47 STREET
BROOKLYN, NY 11219

CHAMPION COMBUSTION
850 ELBE AVE
STATEN ISLAND, NY 10304

CHATHAM HEDGING ADVIORS
670 MYRTLE AVE
SUITE 575
BROOKLYN, NY 11205

CHESKIEL BERKOWITZ
70 UNION AVE
APT. 1
BROOKLYN, NY 11206

COMFORT BEDDING
13 CHRISTOPHER AVE.
BROOKLYN, NY 11212

CON EDISON
P.O. BOX 1701
NEW YORK, NY 10116

CORP. COUNSEL FOR NYC
100 CHURCH STREET
NEW YORK, NY 10007

CROKER FIRE DRILL CORPORA
235 BROOKSITE DRIVE
HAUPPAUGE, NY 11788

CSC
P.O.BOX 13397
PHILADELPHIA, PA 19101

DUETTO RESEARCH INC.
2001 GATEWAY PLACE
#520W
SAN JOSE, CA 95110

DURA-LIFT INC.
201 HARTLE STREET
SUITE B
SAYREVILLE, NJ 08872

EEMD INC.
9 WACCABUC RIVER LANE
SOUTH SALEM, NY 10590

ENERCON TECHNICAL SERVICE
1233 MCDONALD AVENUE
BROOKLYN, NY 11230

FEDEX
P.O. BOX 371461
PITTSBURGH, PA 15250

FIRST INSURANCE FUNDING
P.O. BOX 7000
CAROL STREAM, IL 60197

GEORGE KENEDY LLC
P.O. BOX 40498
BROOKLYN, NY 11204

GREATER SHIELD
P.O. BOX 110836
BROOKLYN, NY 11211

GREEN & WHITE BOUTIQUE
LINEN
410 GARIBALDI AVENUE
LODI, NJ 07644

GUESTTEK INTERACTIVE
ENTERTAINMENT INC.
1501 NORTH PLANO ROAD
STE 100
RICHARDSON, TX 75081

HARBOR LINEN
P.O. BOX 3510
CHERRY HILL, NJ 08034

HARDVARD STARS INC.
38 WEST 32ND ST.
#1605
NEW YORK, NY 10001

HERMAN RUBIN
175 CLYMER STREET
BROOKLYN, NY 11211

HOTELS BY DAY, LLC
64 BEAVER STREET
NEW YORK, NY 10004

HOUSE OF KOOSER
P.O. BOX 3184
NEW YORK, NY 10163

ID CLEANERS & CARPETING
167 MADISON AVENUE
NEW YORK, NY 10016

INTERNAL REVENUE SERVICE
PO BOX 7346
PHILADELPHIA, PA 19101-7346

JACOB RUBIN
858 BEDFORD AVENUE
BROOKLYN, NY 11205

JOHN MINI DISTINCTIVE
LANDSCAPES
250 BRENNER DRIVE
CONGERS, NY 10920

KRISS & FEUERSTEIN
360 LEXINGTON AVENUE
SUITE 1200
NEW YORK, NY 10017

LIPA RUBIN
860 BEDFORD AVENUE
BROOKLYN, NY 11205

M3 ACCOUNTTING + ANALYTIC
1715 N BROWN ROAD
BLDG. A, SUITE 200
LAWRENCEVILLE, GA 30043

M6IT CONSULTING
203 WEST 87TH ST
SUITE 32
NEW YORK, NY 10024

MANHATTAN BEER DISTRIBUTO
955 EAST 149TH STREET
BRONX, NY 10455

MR LINEN SERVICES LLC
575 LEXINGTON AVE
4TH FL.
NEW YORK, NY 10022

NATIONAL GRID
P.O. BOX 11741
NEWARK, NJ 07101

NY STATE DEPT. OF FINANCE
ATTN: BANKRUPTCY SPECIAL
PO BOX 5300
ALBANY, NY 12205

NYC DEPT. OF FINANCE
345 ADAMS STREET, 3RD FL.
ATTN: LEGAL AFFAIRS
BROOKLYN, NY 11201

NYS SALES TAX PROCESSING
P.O. BOX 15168
ALBANY, NY 12212

OFFICE OF THE ATTY GEN
28 LIBERTY ST.
NEW YORK, NY 10005

ORACLE AMERICA, INC.
P.O. BOX 203448
DALLAS, TX 75320

PERSONNEL CONCEPTS
P.O. BOX 3353
SAN DIMAS, CA 91773

POWER PRO NY
100A BROADWAY
#233
BROOKLYN, NY 11249

PREMIUM PEST CONTROL
P.O. BOX 1261
LINDEN, NJ 07036

PROTEL VOICE DATA
SECURITY CORP.
709 CHURCH AVENUE
BROOKLYN, NY 11218

PURCHASE POWER
PO BOX 371874
PITTSBURGH, PA 15250-7874

RIGHTWAY RESTORATION LLC
98 BEARD ST.
BROOKLYN, NY 11231

RISE ELEVATOR INSPECTIONS
2008 OCEAN AVE
SUITE 2C
BROOKLYN, NY 11230

SAVECOM
709 CHURCH AVE
BROOKLYN, NY 11218

SIMON'S INDUSTRIAL SUPPLY
45-02 37TH AVENUE
LONG ISLAND CITY, NY 11101

T-Y GROUP, LLC
P.O BOX 538033
ATLANTA, GA 30353

THE NEW YORK TIMES
P.O. BOX 371427
PITTSBURGH, PA 15250

THE REGENCY GROUP
32 WEST 39TH STREET
12TH FLOOR
NEW YORK, NY 10018

TIMEPAYMENT CORP
P.O. BOX 3069
WOBURN, MA 01888

TOYS FOR YOU INC.
1172 59TH STREET
BROOKLYN, NY 11219

TRAORE CLEANING LLC
1187 ANDERSON AVE
APT. 6E
BRONX, NY 10452

TRAVEL MEDIA GROUP
P.O. BOX 775523
CHICAGO, IL 60677

TRAVELCLICK INC.
P.O. BOX 71199
CHICAGO, IL 60694

US ATTY OFFICE -SDNY
86 CHAMBERS STREET
ATTN: TAX AND BANKRUPTCY
NEW YORK, NY 10007

WOLF GORDON
333 SEVENTH AVE
6TH FL
NEW YORK, NY 10001

**United States Bankruptcy Court
Southern District of New York**

In re **85 Flatbush RHO Hotel LLC**

Debtor(s)

Case No. **20-23281-rdd**

Chapter **11**

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **85 Flatbush RHO Hotel LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

January 19, 2021

Date

/s/ FRED B. RINGEL

FRED B. RINGEL

Signature of Attorney or Litigant

Counsel for **85 Flatbush RHO Hotel LLC**

ROBINSON BROG LEINWAND GREENE GENOVESE & GLUCK P.C.

875 THIRD AVENUE

New York, NY 10022

(212) 603-6300